## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

LAIII 2/295

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)		TYPE [	TYPE		OR SMALL ENTIT		
TOTAL CLAIMS			24				RATE	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			.24 minus 20=		* 4		X\$ 9=		OR	X\$18=	70,	
INDEPENDENT CLAIMS			3 minus 3 =		* 5		X42=		OR	X84=	' "	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+140=		OR.	+280=		
* If the difference in column 1 is			less than zero, enter		"0" in column 2		TOTAL		OR	TOTAL	512	
	С	LAIMS AS A	MENDE	ENDED - PART II					]	OTHER		
		(Column 1)	(Colum				SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus			=	X42=		OR	X84=		
	FIRST PRESE	NTATION OF MI	JUNPLE DE	PENDEN	CLAIM		+140=		OR	+280=		
	TOTAL								OR	TOTAL		
(Column 1) (Column 2) (Column							ADDIT. FEE			ADDIT. FEE		
	10.4 (4.40)	CLAIMS		HIGH		(Column 3)		ADDI		-	ADD!	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X42=		OR	X84=		
L	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		.140			. 200		
BEST AVAILABLE COPY							+140= TOTAL		OR	+280=		
	ADDIT								OR ,	TOTAL ADDIT FEE		
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X42=		ŀ	X84=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDE				CLAIM		7.42-		OR	X04=		
	f the entry in co	mn 1 is loss than th	o onto a sal	imn Ot:	. 10	ump 2	+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2 write '0 in column 3  ** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20"  ***If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3 enter "3"  ***If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3 enter "3"												
	The "Highest Num	iber Previously Pai	d For Total c	r Independe	enti is the	highest number f	found in the app	ropriate box	in colu	ımn 1		